SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE / OF 2 (check only one) 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	nay not be sold or used by any	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	address of any political committee	to solicit contributions from such confinitees.
Giannaros For C	Congress	
Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Blumenthal For Connecticut		06/20/2014
Mailing Address 77 Summer S7. City Stanford State Zip Code CT 06-901		06 20 2017
City Stanford State Zip Code CT 06.901		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribut	The state of the s	5.00.00
Candidate Name Condidate Name	Category Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial)		Date of Disbursement ;
Cargas For Congress Mailing Address 2450 Louisiana St. State Zin Code		0.8 1 20 1 201 4
City Houston State TX		Amount of Each Disbursement this Period
Purpose of Disbursement Pull to 12 Contribu		7 5,0,0,0,D
Office Sought: X House Disbursement F	·or:	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial)		Date of Disbursement
c. DSCC-Federal Tressurer Emma Pieric		M M / D D / Y Y Y Y
Mailing Address 30 Arbor St. State Zin Code		06 20 2014
City Hartford CT	Zip Code 06/06	Amount of Each Disbursement this Period
Purpose of Disbursement Pulsitical Contribution O.1.1		1.0.0.0.0.0
Candidate Name Category/		, ⁻
Office Sought: House Disbursement F Senate Prima President Other State: District:	For:	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional)		
TOTAL This Period (last page this line number only)		>